

**TOWN OF DAVIE
TOWN COUNCIL AGENDA REPORT**

TO: Mayor and Councilmembers

FROM/PHONE: Herb Hyman/797-1016

PREPARED BY: Herb Hyman/797-1016

SUBJECT: Resolution

AFFECTED DISTRICT: All

ITEM REQUEST: Schedule for Council Meeting

TITLE OF AGENDA ITEM: SELECTION OF FIRM - A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING THE FIRM OF BURTON & ASSOCIATES TO PROVIDE A COMPREHENSIVE IMPACT FEE STUDY AND AUTHORIZING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AN AGREEMENT FOR SUCH SERVICES.

REPORT IN BRIEF: The Town solicited competitive sealed proposals for providing a comprehensive impact fee study. RFP documents were sent to fourteen (14) prospective proposers. Additionally, the bid was advertised state-wide in Florida Bid Reporting and nationally in BidNet and also posted on the Town's web site. The Town received seven (7) responses { six (6) proposals and one (1) "no bid" response}. The selection committee short listed the top four (4) firms and invited them to make an oral presentation. Upon hearing the oral presentation from the four (4) firms, the selection committee ranked the firms in order of preference. Therefore, the recommendation is for Burton & Associates as the top ranked firm in accordance with the ranking totals attached hereto.

PREVIOUS ACTIONS: Not applicable.

CONCURRENCES: The firm of Burton & Associates was chosen by the selection committee.

FISCAL IMPACT: Yes

Has request been budgeted? Yes

If yes, expected cost: To be negotiated with the highest ranked firm.

Account Name: Fire Dept-contractual services account, Police Dept-contractual services account, Parks & Rec.-contractual services account

Additional Comments: The negotiated contract will be submitted to the Town Council for approval at a future meeting date.

RECOMMENDATION(S): Motion to approve the resolution.

Attachment(s): Procurement Authorization, Selection Committee Rankings, Incorporation information

RESOLUTION NO. _____

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING THE FIRM OF BURTON & ASSOCIATES TO PROVIDE A COMPREHENSIVE IMPACT FEE STUDY AND AUTHORIZING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AN AGREEMENT FOR SUCH SERVICES.

WHEREAS, the Town solicited proposals to provide a comprehensive impact fee study; and

WHEREAS, the selection committee has selected Burton & Associates as the firm best qualified to provide the required comprehensive impact fee study; and

WHEREAS, it is in the Town's best interest to execute a contract for such services.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA:

SECTION 1. The Town Council of the Town of Davie does hereby accept the selection of Burton & Associates as the firm best qualified to provide the required comprehensive impact fee study and authorizes the Town Administrator or his designee to negotiate an agreement for such services and present that contract for approval at a future meeting date. Should no agreement be reached with the highest ranking firm, then the Town Administrator or his designee shall negotiate with the next ranked firm and present that agreement for approval.

SECTION 2. This resolution shall take effect immediately upon its passage and adoption.

PASSED AND ADOPTED THIS _____ DAY OF _____,
2008

Attest:

MAYOR/COUNCILMEMBER

TOWN CLERK

APPROVED THIS _____ DAY OF _____, 2008

TOWN OF DAVIE PROCUREMENT AUTHORIZATION

ACCOUNT NUMBER.	BUDGET ITEM & DESCRIPTION	APPROXIMATE COST
001-0602-522.0407	COMPREHENSIVE IMPACT	\$20,000
001-0525-521.03-06	FEE STUDY	\$20,000
001-0812-572-03-24		\$20,000

METHOD OF PROCUREMENT (check the one that applies)

- ☐ Open Competitive Bidding
☐ Piggyback on Contract Number _____
☐ Sole Source or Single Source
☒ Request For Proposals

SPECIFICATIONS & LIST OF VENDORS MUST BE ATTACHED

Signed _____

Department Head

Have Funds been Reserved

REQ. 36783

Date 1/24/08

Signed _____

Signed _____

Town Administrator

BIDS SUBMITTED

VENDOR	COST
BURTON & ASSOCIATES	RANKED 1 ST
MUN. FINANCIAL, INC.	RANKED 2 ND
PUBLIC RESOURCE MANAGEMENT, INC.	RANKED 3 RD
DUNCAN ASSOCIATES	RANKED 4 TH
TISCHER BISE	NOT RANKED
NABORS, GIBLIN & NICKELSON P.A.	NOT RANKED
ALLSTATE RESOURCE MANAGEMENT, INC.	NO BID

Signed _____

Procurement Manager

BID SPECIFICATION COMMITTEE'S RECOMMENDATION

Vendor	Cost
BURTON & ASSOCIATES	CONTRACT TO BE NEGOTIATED

	A	B	C	D	E
1					
2					
3					
4					
5					
6	COMMITTEE MEMBER	PUBLIC RESOURCE	DUNCAN ASSOCIATES	BURTON & ASSOCIATES	MUNI FINANCIAL
7					
8					
9	W. ACKERMAN	3	4	1	2
10	R. MUNIZ	3	4	1	2
11	M. DIEZ	2	4	3	1
12	L. NGUYEN	4	3	1	2
13	B. HITCHCOCK	4	B	S	E
14	F. SURIANO	3	4	1	2
15	H. HYMAN	4	3	1	2
16					
17	TOTAL	19	22	8	11
18					
19	RANKING	3 RD	4 TH	1 ST	2 ND

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Print or type
See Specific Instructions on page 2

Name (as shown on your income tax return)

Business name, if different from above

Burton & Associates

Check appropriate box ☐ Individual/
Sole proprietor ☒ Corporation ☐ Partnership ☐ Other ▶

☐ Exempt from backup
withholding

Address (number, street, and apt. or suite no.)

200 Business Park Circle, Ste. 101

City, state and ZIP code

St. Augustine, Florida 32095

List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the amount is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number

or

Employer identification number
59-3301950

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign
Here

Signature of
U.S. person ▶

Date ▶

2/19/08

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued);
- Certify that you are not subject to backup withholding; or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a partner if you are

- An individual who is a citizen or resident of the United States;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States; or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity

I, Michael E. Burton, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: Burton & Associates
Address: 200 Business Park Circle, Ste. 101
St. Augustine, Florida 32095
FEIN 59-3301950
State and date of incorporation Florida - March 13, 1995

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
		%
	N/A	%
		%
		%

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address

By: _____

Signature of Affiant

Date: February 19, 2008

Michael E. Burton

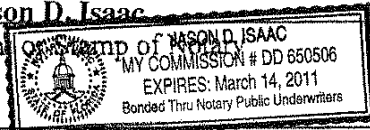
Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 19th day of
February 2008, by Michael E. Burton, he/she is
personally known to me or has presented _____ as
identification.

Notary Public, State of Florida at Large

Jason D. Isaac

Print



Serial Number

My Commission Expires : _____

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Previous on List Next on List Return To List					
Events No Name History <input type="text" value="Entity Name"/>					
Detail by Entity Name					
<u>Florida Profit Corporation</u>					
BURTON & ASSOCIATES, INC.					
<u>Filing Information</u>					
Document Number	P95000020795				
FEI Number	593301950				
Date Filed	03/13/1995				
State	FL				
Status	ACTIVE				
Last Event	AMENDED AND RESTATED ARTICLES				
Event Date Filed	01/26/2004				
Event Effective Date	NONE				
<u>Principal Address</u>					
200 BUSINESS PARK CIRCLE STE. 101 ST. AUGUSTINE FL 32095					
Changed 02/06/2006					
<u>Mailing Address</u>					
200 BUSINESS PARK CIRCLE STE. 101 ST. AUGUSTINE FL 32095					
Changed 02/06/2006					
<u>Registered Agent Name & Address</u>					
BURTON, MICHAEL E 200 BUSINESS PARK CIRCLE STE. 101 ST. AUGUSTINE FL 32095 US					
Name Changed: 07/13/1998					
Address Changed: 02/06/2006					
<u>Officer/Director Detail</u>					
Name & Address					

Title P

BURTON, MICHAEL E
200 BUSINESS PARK CIRCLE, STE. 101
ST. AUGUSTINE FL 32095

Title V

GRIFFIN, CYNTHIA
200 BUSINESS PARK CIRCLE, STE. 101
ST. AUGUSTINE FL 32095

Annual Reports**Report Year Filed Date**

2006	02/06/2006
2007	07/12/2007
2008	01/11/2008

Document Images

01/11/2008 -- ANNUAL REPORT	View image in PDF format
07/12/2007 -- ANNUAL REPORT	View image in PDF format
02/06/2006 -- ANNUAL REPORT	View image in PDF format
01/07/2005 -- ANNUAL REPORT	View image in PDF format
04/16/2004 -- ANNUAL REPORT	View image in PDF format
01/26/2004 -- Amended and Restated Articles	View image in PDF format
01/03/2003 -- ANNUAL REPORT	View image in PDF format
03/18/2002 -- ANNUAL REPORT	View image in PDF format
05/10/2001 -- ANNUAL REPORT	View image in PDF format
02/16/2000 -- ANNUAL REPORT	View image in PDF format
04/29/1999 -- ANNUAL REPORT	View image in PDF format
07/13/1998 -- REINSTATEMENT	View image in PDF format
06/19/1996 -- ANNUAL REPORT	View image in PDF format

Note: This is not official record. See documents if question or conflict.

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